UTILITY PATENT APPLICATION	ATTORNEY DOCKET 86564RLO						
TRANSMITTAL UNDER 37 CFR 1.53(b)	Customer No. 01333						
To: Commissioner for Patents	Express Mail Label No.						
P.O. Box 1450	λ,						
Alexandria, VA. 22313-1450	EV293511265US						
OLED DEVICE HAVING MICROCAVITY	Date: 8/19/03						
GAMUT SUBPIXELS AND A WITHIN GAMU							
SUBPIXEL	" L						
SODI IXEE	wi 🛱						
First Named Inventor (or Application Identifier):	10/64						
Dustin Winters, et al	033						
Enclosed are:							
1. X Specification	6. X Assignment of the invention to						
2 A Shaway as the six of y	Eastman Kodak Company						
2. 4 Sheet(s) of drawing(s)	7. Certified copy of a priority						
3. X Information Disclosure Statement Under 37 CF 1.97.	R 8. Associate Power of Attorney						
4. Combined Declaration for Patent Application and Pov	ver of Attorney						
4a. X New	or or records.						
4b. Copy from a prior application (37 CFR 1.	63(d) (for continuation/divisional with Box 11 completed)						
5. Incorporation by Reference (useable if Box 4b i							
<u>checked</u> ) The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Bo	S (-)						
is considered as being part of the disclosure of the accompan	(4b, in the prior application, see 37 CFR 1.63(d)(2) and ying 1.33(b).						
application and is hereby incorporated by reference therein.	,g						
10. If a 111A application prior to examination of the a	bove-identified application, amend the specification at Page 1,						
after the title, by inserting the following:							
CROSS REFERENCE TO RELATED APPLIC							
filed, entitled.	from U.S. Provisional Application Serial No.,						
If a CONTINUING APPLICATION, check appropriate bo	x and supply the requisite information:						
	tion-in-part (CIP) of prior application No:						
12. X Please address all written communications to Tho	mag H. Class. Datant Lagal Staff						
Eastman Kodak Company, 343 State Street, Roch							
Please Direct all telephone calls to Raymond L. O	wens at 585-477-4653.						
The filing fee has been calculated as shown below:							
FOR: NO. FILED NO. EX	TRA RATE FEE						
BASIC FEE	\$ 750						
TOTAL CLAIMS $17 - 20 = -3$							
INDEPENDENT CLAIMS $1 - 3 = -2$	x 84 = \$0						
MULTIPLE DEPENDENT CLAIM PRESENTED	+ 280 \$ 0						
	<b>TOTAL</b> \$ 750						
X Please charge my Eastman Kodak Company Deposit Ad	ecount No. 05-0225 in the amount of \$ 750						
A duplicate copy of this							
X The Commissioner is hereby authorized to charge any a							
37 CFR 1.16 or credit any overpayment to Eastman Kodak Company Deposit Account No. <u>05-0225</u> .							
A duplicate copy of this							
	W 1/7X						
Permand I Owe /1	Cell 1						
	Attorney for Applicants						
	Registration No. 22,363						
Facsimile: 585-477-4646							

UTILITY PATENT APPLICATION TRANSMITTAL UNDER 37 CFR 1.53(b)				ATTORNEY DOCKET 86564RLC Customer No. 0133					
To: Commissioner for			(B)	Express M	ail Label		i		
P.O. Box 1450	1 440111	-							
Alexandria, VA. 22313-14	450			EV293511	265US				
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OLED DEVICE HAVING				Date:	811211	<u>us</u>			
GAMUT SUBPIXELS AT	ND A	WITHIN C	GAMUT						
SUBPIXEL									
First Named Inventor (or A	Applica	ation Ident	ifier):						
Dustin Winters, et al									
Enclosed are:				6. X	7 Assignme	ent of the inventior	ı to		
1. X Specification				0. <u>A</u>		Kodak Company	110		
2. 4 Sheet(s) of drawing	g(s)			7.		copy of a priority			
3. X Information Disclo		itement Und	er 37 CFR	8.	Associate	Power of Attorne	y		
1.97. 4. Combined Declaration for	or Patent	Application	and Power o	f Attorney:	J				
4a. X New	7 7 400	pp		,					
4b. Copy from a prior application (37 CFR 1.63(d) (for continuation/divisional with Box 11 completed)									
5. Incorporation by R	eference	e (useable if	Box 4b is	9.	Deletion	of Inventor(s).			
checked) The entire disclosure				Signed sta	atement atta	ched deleting inve	ntor(s) named		
which a copy of the oath or dec	laration	is supplied u	ınder Box 4b,		or applicatio	n, see 37 CFR 1.63	3(d)(2) and		
is considered as being part of the application and is hereby incorp				1.33(b).					
10. If a 111A application	n prior to	o examinatio	on of the abov	e-identified ap	plication, an	nend the specificat	ion at Page 1,		
after the title, by ins				• 1	<b>.</b>	•			
CROSS REFERENCE TO RELATED APPLICATION									
Reference is made to and priority claimed from U.S. Provisional Application Serial No.,									
filed, entitled.  If a CONTINUING APPLIC.	ATION	check appro	onriate box ar	nd supply the re	eauisite info	rmation:			
11. Continuation	Divisio			-in-part (CIP)		application No:			
				-		æ			
12. X Please address all was Eastman Kodak Cor						111,			
Please Direct all tele	npany, s enhone c	alls to Raym	ond L. Owen	s at 585-477-4	653.				
	-								
The filing fee has been calculated FOR:		. FILED	NO. EXTR	A RATI	Ξ	FEE			
BASIC FEE						\$ 750			
TOTAL CLAIMS	17	- 20 =	-3	x 18 =		\$0			
INDEPENDENT CLAIMS	1	- 3 =	-2	x 84 =		\$ 0 \$ 0			
MULTIPLE DEPENDEN	T CLA	IM PRESEN	TED		FAL	\$ 750			
					IAL	\$ 750			
X Please charge my Eastma						ount of \$ 750			
A duplicate copy of this sheet is enclosed  The Commissioner is hereby authorized to charge any additional filing fees required under									
37 CFR 1.16 or credit any overpayment to Eastman Kodak Company Deposit Account No. <u>05-0225</u> .									
A duplicate c py of this sheet is enclosed.									
Raymond L. Owens/das			// <u>/</u> /	orney for A	policants		<del></del>		
Tolophone: 585 477 465	3			officy for Ma					

Telephone: 585-477-4653 Facsimile: 585-477-4646

Registration No. 22,363

Express Mail Label No. EV293511265US				Date:							
				Customer No. 01333					Docket 86564RLO		
Form PTO 1595 1-31-92	REC	CORDATION	FOR	M COVE	R SHEE	T			FMENT OF Co		
MODIFIED 2-15-93 PATENTS ONLY											
Tab settings ® ® ® ▼	▼			▼		*	▼		▼_		
1. Name of conveying party(is Assignor #1: Dustin' Assignor #2: Yuan-S Assignor #3: Steven Assignor #4: Ronald Assignor #5: Andrew	Winters heng Tya A. Van Sl S. Cok	yke									
2. Name and address of receiving party(ies):											
Name: Eastman Kodak Con	npany	City:	Roc	nester	· · · · · ·	State:	NY	Zip:	14650	-2201	
3. Nature of Conveyance:	X As	signment									
Assignment Execution Da Assignor#1: 11 Augu Assignor#2: 11 Augu Assignor#3: 19 Augu Assignor#4: 11 Augu Assignor#5: 19 Augu	st 2003 st 2003 st 2003 st 2003										
4. Application number(s) or patent number(s): Application No. To Be Assigned  If this document is being filed together with a new application, the execution date of the application is the same as the execution date of the Assignment, <i>unless</i> stated as follows:											
5. Name and address of party to whom correspondence concerning document should be mailed:											
Name: Thomas H. Cl	Thomas H. Close Address:				Eastman Kodak Company, Patent				Legal Staff		
City: Rochester		S	State:	NY		Zip:	1465	50-2201			
6. The total number of applica	tions and	patents involved	l is one	(1) unless	stated as fo	ollows:					
7. Total fee (37 CFR 1.21h):	\$		closed				charged	to deposit	account		
8. Eastman Kodak Company Deposit account number: 05-0225											
DO NOT USE THIS SPACE											
9. Statement and signature.  To the best of my knowledge of the original document.  Dia St. George  Name of Person Sig		lief, the foregoin	infor	HI	) <u> </u>	Je_		ached copy	A/O Date	e copy	